

EXHIBIT A-1

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF SOUTH CAROLINA
CHARLESTON DIVISION

Nelson L. Bruce,

Plaintiff(s),

vs.

REV FEDERAL CREDIT UNION, TRANS
UNION, LLC, et al.

Defendant(s).

CASE NO.: 2:22-cv-01292-BHH-MGB

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the Subpoena issued to LexisNexis Risk Solutions, Inc. ("LexisNexis") has been mailed to LexisNexis via the: UNITED STATES POST OFFICE via the UNITED STATES POSTAL SERVICE by First Class Certified Mail Restricted Delivery. Dated this 9th day of November, 2023.

SENT TO:

LexisNexis Risk Solutions Inc.
Attention: Legal Department
1000 Alderman Drive
Alpharetta, GA 30005
Certified Mail No.: 7022 2410 0000 5366 2697

"Without Prejudice"

Nelson L. Bruce

Nelson L. Bruce, Propria Persona, Sui Juris
"All Natural Rights Explicitly Reserved and Retained"
U.C.C.1-207/ 1-308, 1-103.6
c/o P.O. Box 3345, Summerville, South Carolina 29484
Phone: 843-437-7901
Email: leonbruce81@yahoo.com

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FAQs >

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Your item was delivered to an individual at the address at 1:55 pm on November 13, 2023 in ALPHARETTA, GA 30005.

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ALPHARETTA, GA 30005
November 13, 2023, 1:55 pm

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Alpharetta, GA 30005

OFFICIAL USE

Certified Mail Fee	\$4.35	0483 08
Extra Services & Fees (check box, add fee as appropriate)	\$3.55	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	Postmark Here
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$1.59	11/09/2023
Total Postage and Fees	\$7.47	

Sent To
 LEXISNEXIS RISK SOLUTIONS INC.
 Street and Apt. No., or PO Box No.
 1000 ALDERMAN DRIVE
 City, State, ZIP+4®
 ALPHARETTA, GEORGIA 30005

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: LEXISNEXIS RISK SOLUTIONS INC. ATTENTION: LEGAL DEPARTMENT 1000 ALDERMAN DRIVE ALPHARETTA, GEORGIA 30005</p> <p>2. Article Number (Transfer from service label) 7022 2410 0000 5366 2697</p>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) E. H. HICKS</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>		
<p>9590 9402 7663 2122 5428 88</p>	<p>3. Service Type</p> <table border="0"> <tr> <td> <input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery </td> <td> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </td> </tr> </table>	<input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt



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Signature Required. Dated this 9th day of November, 2023.

SENT TO:

LexisNexis Risk Solutions Inc.
Attention: Legal Department
1000 Alderman Drive
Alpharetta, GA 30005
Priority Mail Express No.: EI 259 217 691 US

"Without Prejudice"

Nelson L. Bruce, Propria Persona, Sui Juris
"All Natural Rights Explicitly Reserved and Retained"
U.C.C.1-207/ 1-308, 1-103.6
c/o P.O. Box 3345, Summerville, South Carolina 29484
Phone: 843-437-7901
Email: leonbruce81@yahoo.com



November 13, 2023

Dear Nelson Bruce:

The following is in response to your request for proof of delivery on your item with the tracking number:
EI25 9217 691U S.

Item Details

Status: Delivered, Left with Individual
Status Date / Time: November 13, 2023, 1:55 pm
Location: ALPHARETTA, GA 30005
Postal Product: Priority Mail Express 1-Day®
Extra Services: PO to Addressee
 Up to \$100 insurance included

Actual Recipient Name: B ETHRIDGE

Note: Actual Recipient Name may vary if the intended recipient is not available at the time of delivery.

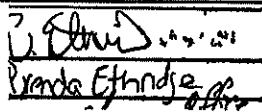
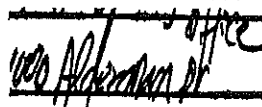
Shipment Details

Weight: 3.0oz

Destination Delivery Address

Street Address: 1000 ALDERMAN DR
City, State ZIP Code: ALPHARETTA, GA 30005-4101

Recipient Signature

Signature of Recipient:	
Address of Recipient:	

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

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